

BEVERAGE MANUFACTURER / DISTRIBUTOR REGISTRATION FORM

Please complete and return **both pages** to Reg.CRVLabeling@CalRecycle.ca.gov
or via fax at (916) 319-7400 or mail to CalRecycle - Registration Unit, 801 K Street, MS 17-03, Sacramento, CA 95814

Doing Business As (DBA) Name(s):

Legal Name:

Federal Tax ID # (Employer Identification Number):

ABC Certificate of Compliance # (if applicable):
(Out-of-state Beer & Malt Manufacturers only)

Physical Business Address

Mailing Address (if different from physical address)

Street:

Street:

City, State Zip

City, State Zip

California Sales/Corp. Office(s)/Other (if applicable)

California Warehouse Location(s) (if applicable)

Check one: ☐ Sales ☐ Corporate ☐ Other (explain)

Check one: ☐ Rented ☐ Leased ☐ Owned

Street:

Street:

City, State Zip

City, State Zip

(Attach additional sheet[s] if necessary)

(Attach additional sheet[s] if necessary)

Primary Point of Contact

☐ Mr. ☐ Mrs. ☐ Ms.

Secondary Point of Contact

☐ Mr. ☐ Mrs. ☐ Ms.

Name:

Name:

Title:

Title:

Phone: ()

Phone: ()

Email:

Email:

Fax:

Fax:

Preferred method of contact: ☐ Phone ☐ Email

Preferred method of contact: ☐ Phone ☐ Email

Type of Ownership Structure (Check one)

☐ Sole Proprietorship
☐ Married Co-Ownership
☐ Corporation
☐ Non Profit Corporation

☐ Cooperative
☐ Limited Liability Company
☐ General Partnership
☐ Limited Partnership

☐ Limited Liability Partnership
☐ Other _____

1. Effective date of beverage product sales or transfer in California: _____ (month/year)

2. Are free beverage product samples offered or proposed to be offered in California?

YES ☐

No ☐

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3. Provide the types of beverage products, their container types, and container sizes offered for sale or transfer, or proposed to be offered for sale or transfer in California: *(Check all that apply)*

Product Line:

- ☐ Beer or Malt Beverages
☐ Wine Coolers/Distilled Spirit Coolers
☐ Carbonated Water
☐ Non-Carbonated Water
☐ Carbonated Soft Drinks
☐ Non-Carbonated Soft Drinks
☐ Sport Drinks
☐ Carbonated Fruit Drinks
☐ Non-Carbonated Fruit Drinks
☐ Coffee/Tea Drinks
☐ 100% Vegetable Juice *(Size in ounces):* _____
☐ 100% Fruit Juice *(Size in ounces):* _____
☐ Other *(Describe):* _____

Container Type:

- ☐ Aluminum
☐ Glass
☐ Bi-Metal

☐ Plastic
☐ #1 PET
☐ #2 HDPE
☐ #3 PVC
☐ #4 LDPE
☐ #5 PP
☐ #6 PS
☐ #7 Other
☐ Other *(Describe):* _____

Sizes:

- ☐ Under 24 ounces
☐ 24 ounces or more

Refillable:

- ☐ All
☐ None
☐ Some

4. Do you bottle your own beverages? ☐ All ☐ None ☐ Some

If **None** or **Some**, provide the name and contact information for your beverage suppliers, co-packers and/or bottlers *(Attach additional sheets if needed)*:

Company

Contact Person

Phone

Address

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5. Who do you sell or transfer beverages directly to in California? *(Check all that apply)*

- ☐ Retailers ☐ Restaurants ☐ Consumers ☐ Common Carriers *(Planes, trains, etc.)*
☐ Distributors *(If checked, provide information below)* ☐ Other *(Describe):* _____

Distributor

Contact Person

Phone

Address

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6. Do you prefer to receive the registration letter and related documents by: ☐ Email or ☐ Regular mail?

Provide any additional information in the space below: _____
(Attach additional sheets if needed)